Voucher prepar THE UNITED STA	red atATES, Dr.,	(Dopartmen	(Give place and date) yee's Account No				- Press	PAI	р ву)‡5		
To	ATES, Dr.,	Pa	(Givo place and date)				- -	Syrd) # 5		
The United STA	ATES, Dr.,	Pa	yee's Account No				- Joseph	Trud	件5		
To	······································						Treas.	TVVO	20		
			(Payco)					100 0532			
			(Payco)	<i>To</i>							
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	(Add	ress)	(City)		tate)		. ——				
No. and Date of D. Order	ate of Delivery or Service	(Enter description schedule, a Discount Terms	ARTICLES OR SERVICES r description, item number of contract or Federal supply schedule, and other information deemed necessary) Torms			QUANTITY -	UNIT PRICE Cost Per		AMOUNT Dollars Cto		
		2330211(10111)			····						
- 1	And	Cost							369	-94	
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PAYMENT:											
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I certify that the above bill is correct and just and that payment has not been received. STATOTHR (Sign original only) (Payee must NO Differences						use this	space)				
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Date 5/9/58	*Pavee	ot required when	a like certificate is made by payeo on atte	sched bill or bills)	Amou	nt verified:	correct for		369	95	
Per		Title _				ature or initi	~ " .				
Contract No. 🔑 -	-101	Date	Req. No.		D	ate	Ir	voice Rec'd			
Pursuant to authority	vested in me, I	certify that this acco	ount is correct and proper fo	or payment.							
Approved for \$				†		(Authoriz	ed Cortifyi	g Officer)			
Ву		ORIGINAL									
		·	ONLY	ъ.							
Fitle			ED WHEN PURCHASES ARE MADE								
						*				 -	
	ACCOUN	ITING CLASSIFICA	FION (Appropriation Syml	bol must be sh	own; othe	r classificati	on option	nl)			